

BEST AVAILABLE COPY

----- SEARCH AREA (for additional cross references) -----

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MWP		13 00
O.I.P.E. CLASSIFIER			7 01-19-00
FORMALITY REVIEW	3F1	60245	1-31-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
1	✓ ✓ ✓ ✓ ✓ ✓
2	✓ ✓ ✓ ✓ ✓ ✓
3	✓ ✓ ✓ ✓ ✓ ✓
4	✓ ✓ ✓ ✓ ✓ ✓
5	✓ - -
6	✓ ✓ ✓ ✓ ✓ ✓
7	✓ ✓ ✓ ✓ ✓ ✓
8	✓ -
9	✓ ✓ ✓ ✓ ✓ ✓
10	✓ ✓ ✓ ✓ ✓ ✓
11	✓ ✓ ✓ ✓ ✓ ✓
12	✓ ✓ ✓ ✓ ✓ ✓
13	✓ ✓ ✓ ✓ ✓ 0
14	✓ ✓ ✓ ✓ ✓ ✓
15	✓ ✓ ✓ ✓ ✓ ✓
16	✓ ✓ ✓ ✓ ✓ ✓
17	✓ ✓ ✓ ✓ ✓ ✓
18	✓ -
19	✓ ✓ ✓ ✓ ✓ ✓
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24	✓ ✓ ✓ 0
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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